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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 532552000701
Application Number	10/551,579	Filed April 2, 2004 (Int'l)
For COMBINATION COMPOSITIONS OF CAMPTOTHECINS AND FLUOROPYRIMIDINES		
Art Unit	1615	Examiner G. Kishore
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$120 Small Entity Fee \$60
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Fee \$460 Small Entity Fee \$230
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	Fee \$1050 Small Entity Fee \$525
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	Fee \$1640 Small Entity Fee \$820
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	Fee \$2230 Small Entity Fee \$1115
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>29,959</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>/Elizabeth Cary Miller/ Reg. No. 54,708, for</u> <u>Signature</u>		November 6, 2007 <u>Date</u>
<u>Kate H. Murashige</u> <u>Typed or printed name</u>		(858) 720-5112 <u>Telephone Number</u>
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.	